



STATE OF WASHINGTON
**APPLICATION FOR CHANGE/TRANSFER
OF WATER RIGHT**

RECEIVED

JUN 21 2010
WA State Department
of Ecology (SWRO)

For filing with the Department of Ecology or with County Conservancy Boards

**A NON-REFUNDABLE MINIMUM FEE OF \$50.00 PAYABLE TO THE DEPARTMENT OF
ECOLOGY MUST ACCOMPANY THIS APPLICATION**

(Check all that apply.)

- ☐ Change purpose(s) of use
☐ Add purpose(s) of use
☐ Change point(s) of diversion/withdrawal
☒ Add point(s) of diversion/withdrawal
☐ Change/transfer place of use
☐ Other (i.e. consolidation, intertie, trust water)

Explain: DIVIDING WATER RIGHT PERMIT

#S2-25501C issued on April 1981 to
Matlock Fruit Farms.

FOR OFFICE USE ONLY

CHANGE No. CS2-25501 WRIA 10

DATE ACCEPTED 1/21/10 BY SL

FEE \$ ✓ REC'D 1/21/10

CHECK No. _____

ECY Coding: 001-002-WR10285-000011

SEPA: ☐ Exempt ☐ Not exempt

****IF MORE SPACE IS NEEDED, ATTACH ADDITIONAL SHEETS (PLEASE PRINT OR TYPE CLEARLY)****

1. Applicant Information:

APPLICANT/BUSINESS NAME	PHONE NO.	FAX NO.
DLM GEM, LLC -and- I & A MATLOCK, LLC	(253) 841-0232	()
ADDRESS <u>15302</u> <u>10502</u> 96th St E		
CITY	STATE	ZIP CODE
Puyallup	WA	98372

CONTACT NAME (IF DIFFERENT FROM ABOVE)	PHONE NO.	FAX NO.
Gilbert & Sandy Mendoza	(253) 845-3260	()
ADDRESS 1911 86th St E		
CITY	STATE	ZIP CODE
Tacoma	WA	98445

2. Water Right Information:

WATER RIGHT OR CLAIM NUMBER	RECORDED NAME(S)
# <u>S 2 25501 C</u>	<u>Matlock Fruit Farms</u>
DO YOU OWN THE RIGHT TO BE CHANGED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
IF NO, PROVIDE OWNER(S) NAME and ADDRESS:	
HAS THE WATER BEEN PUT TO BENEFICIAL USE IN THE LAST FIVE (5) YEARS? <input type="checkbox"/> YES <input type="checkbox"/> NO	

Please attach copies of any documentation that demonstrates consistent, historical use of water since the right was established. Also, if you have a water system plan or conservation plan, please include a copy with your application.

Land leased and farmed by Tom Duris, d.b.a. Duris Farm, LLC of Puyallup, WA. He has been a renter since 1997, growing vegetables and fruit with seasonal irrigation.

FOR OFFICE USE ONLY			
APP. NO. <u>G 225501</u>	PERMIT NO. <u>62-25501</u>	CERT. NO. <u>G225501</u>	CERT. OF CHANGE NO. <u>CS2-25501</u>

3. Point(s) of Diversion/Withdrawal:

A. Existing

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Puyallup River * See Map								

B. Proposed

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Puyallup River	2						05-19-06-7701	
Puyallup River	1						05-19-06-7702	

DO YOU OWN THE EXISTING AND PROPOSED POINT(S) OF DIVERSION/WITHDRAWAL?

EXISTING: ☒ YES ☐ NO PROPOSED: ☒ YES ☐ NO – IF NO, PROVIDE OWNER(S) NAME:
Gilbert Mendoza (Existing) Matlocks (Proposed)

Please include copies of all water well reports involved with this proposal. Also, if you know the distances from the nearest section corner to the above point(s) of diversion/withdrawal, please include that information in Item No. 6 (remarks) or as an attachment.

4. Purpose of Use:

A. Existing

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Agricultural Irrigation		19.2	May 1 to Oct 1 annually

B. Proposed

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Agricultural Irrigation		19.2	May 1 to Oct 1 annually

5. Place of Use:

A. Existing

LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED:							
Mendoza - Parcel # 05-19-06-7702							
Matlocks - Parcel # 05-19-06-7701							
¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES

DO YOU OWN ALL THE LANDS IN THE EXISTING PLACE OF USE? ☒ YES ☐ NO – IF NO, PROVIDE OWNER(S) NAME:

B. Proposed

LEGAL DESCRIPTION OF LANDS WHERE NEW USE IS PROPOSED:							
Mendoza Parcel # 05-19-06-7702							
Matlock Parcel # 05-19-06-7701							
¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES

DO YOU OWN ALL THE LANDS IN THE PROPOSED PLACE OF USE? ☒ YES ☐ NO – IF NO, PROVIDE OWNER(S) NAME:

Attach a detailed map of your proposed change/transfer. The map should show existing and proposed point(s) of diversion/withdrawal, place of use and any other features involved with this application. If platted property, please include a certified copy of the plat map.

Are there any ADDITIONAL WATER rights OR CLAIMS RELATED to the same property as the ONE PROPOSED FOR CHANGE/TRANSFER?
☐ YES ☐ NO – IF YES, PROVIDE THE WATER RIGHT/CLAIM NUMBER(S): _____

6. Remarks and Other Relevant Information:

Pump Site #1 (see map) is registered with Dept of Ecology for metering water use. GPS = N 47 09 391 by W 122 13 096
IF FOR SEASONAL OR TEMPORARY, START DATE <u>05/01</u> END DATE <u>10/01</u>

Certain applications may incur a Real Estate Excise Tax liability for the seller of the water rights. The Department of Revenue has requested notification of potential taxable water right related actions and therefore may be provided with a copy of this request.

Please contact the State Department of Revenue for further information. The phone number is (360) 570-3265. The address is: Department of Revenue, Real Estate Excise Tax, PO Box 47477, Olympia, WA 98504-7477.

7. Signatures:

I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I am hereby granting staff from the Department of Ecology or the County Conservancy Board access to the above site(s) for inspection and monitoring purposes. If assisted in the preparation of the above application, I understand that all responsibility for the accuracy of the information rests with me.

I & A MATLOCK, LLC

DLM GEM, LLC

GILBERT MENDOZA

Ivan H. Matlock Managing Member Date: 1-7-2010
David L Matlock Manager / 1/8/2010
 (Applicant) Gilbert A. Mendoza (Date) 1/15/2010

MATLOCK FRUIT FARM

David L Matlock Pres / 1/8/2010
 (Water Right Holder) (Date)
Ivan H. Matlock Managing Member 1-7-2010

IVAN & DAVID MATLOCK

GILBERT MENDOZA

David L Matlock manager DATE: 1/8/2010
Gilbert A. Mendoza / 1/15/2010
 (Land Owner(s) of Existing Place of Use) (Date)

IMPORTANT! APPLICATION FILING INFORMATION IS PROVIDED ON THE NEXT PAGE.

WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):

- ☐ APPLICATION FEE NOT ENCLOSED ☐ MAP NOT INCLUDED or INCOMPLETE
☐ ADDITIONAL SIGNATURES REQUIRED ☐ SECTION _____ IS INCOMPLETE
☐ OTHER/EXPLANATION: _____

STAFF: _____ DATE: ____/____/____

ATTACHMENT FOR
APPLICATION FOR CHANGE

Point(s) of Diversion/Withdrawal - ☐ Existing ☐ Proposed:

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #

DO YOU OWN THE ABOVE POINT(S) OF DIVERSION/WITHDRAWAL? ☐ YES ☐ NO – IF NO, PROVIDE OWNER(S) NAME:

Purpose(s) of Use - ☐ Existing ☐ Proposed:

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE

Place of Use - ☐ Existing ☐ Proposed:

LEGAL DESCRIPTION OF LANDS							
¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES

DO YOU OWN ALL THE LANDS IN ABOVE PLACE OF USE? ☐ YES ☐ NO – IF NO, PROVIDE OWNER(S) NAME: